



RULES MISAPPLICATION REPORTING FORM

YOUR NAME:		TODAY'S DATE:	
PHONE NUMBER:		E-MAIL ADDRESS:	
YOUR POSITION:		SCHOOL OR ORGANIZATION:	

TASO DIVISION

<input type="checkbox"/> BASEBALL	<input type="checkbox"/> BASKETBALL	<input type="checkbox"/> FOOTBALL	<input type="checkbox"/> SOCCER	<input type="checkbox"/> SOFTBALL	<input type="checkbox"/> VOLLEYBALL
-----------------------------------	-------------------------------------	-----------------------------------	---------------------------------	-----------------------------------	-------------------------------------

GAME INFORMATION

GAME DATE:	
GAME LOCATION:	
HOME TEAM:	
VISITING TEAM:	
LEVEL OF GAME:	
TASO CHAPTER:	

PLEASE LIST RULE(S) THAT YOU BELIEVE WERE MISAPPLIED

PLEASE DESCRIBE IN DETAIL THE FACTS OF THE PLAY (INCLUDE TIME, QUARTER, MATCH NUMBER, INNING, ETC)

IS VIDEO AVAILABLE?

--

If so, please send to: Texas Association of Sports Officials
1221 West Campbell Road
Suite 191
Richardson, Texas 75080

Or contact us to transfer electronically